

# BOLTON UNITED HARRIERS

## MEMBERSHIP APPLICATION

THIS FORM SHOULD BE USED FOR BOTH NEW MEMBERSHIPS & RENEWALS



New Membership:

Membership Renewal:  Membership Number:

Title: Mr  Mrs  Miss  Ms  Dr  Other

**You MUST complete all fields with shaded boxes**

Last name:

Give details of your name here. If you have a preferred first name, write it in capitals.

First Name (s):

Address:

Give details of your home address here. Please give your post code.

Town/City:

Post Code:

Home Phone:

Please give details of any contact numbers here. This is important for emergencies. If you have an email Address, please give it. It will help us to contact you more efficiently and with less cost.

Mobile Phone:

Email Address:

Sex:  Male  Female

Date of Birth:  **You MUST give your date of birth. Applications will not be accepted without it.**

Status:  First Claim  Second Claim

If you do not belong to another ATHLETICS club or have resigned from another club, this is a first claim application. In cases of resignation, please give your former club and date of resignation.

Other/Former Clubs:

Resignation Date:  If you still belong to another ATHLETICS club, this is a second claim application. If applying for second claim membership, please give the name of your other club.

### ANNUAL SUBSCRIPTION

Bolton Hawks.....£30.00

(6 – 8 years old)

Junior.....£40.00

(Under 18 and full-time student)

Senior.....£50.00

Family.....£90.00

(Living at same address)

Over 60.....£40.00

Unemployed.....£40.00

Social/Associate.....£15.00

#### Temporary Membership £5

Covers 4 Weeks & deducted from annual subscription when full membership fee paid

Expiration date

#### Name of assigned Coach

Membership does not cover entry to the Track which you will need to pay separately to Serco

Membership of this club is open to **all groups of the community.**

Minimum age requirement is 6 years old.

**For family applications** please complete a separate form for each family member. This is necessary as a health declaration is required for each member.

Membership subscriptions are for the period 1st April to 31st March and are due on the 1st of April each year.

New members only need pay on a pro-rata basis for each full month from the first day of the month in which they join.

Please make cheques payable to "Bolton United Harriers"

**Please complete both sides of this form.**

### Emergency contact (must be completed for all members under 18 years)

Contact Name:  Contact Relationship (e.g. mother, father):

Contact Phone:

2<sup>nd</sup> Contact Name:

2<sup>nd</sup> Contact Relationship:

2<sup>nd</sup> Contact Phone:

Signature and Date:

Signed (by applicant - 18 years old and over)

Date

2012-13

# PERSONAL DECLARATIONS

## MEDICAL

Athletics is a very demanding sport and it is essential that coaches and team managers are made aware of any illness or disability that athletes under their instruction and care may suffer from.

Will you please complete the following details in your/your child's interest and if you are in any doubt about the advisability of your/your child's participation in athletics, please consult your doctor for advice. It is recommended that anyone who is aged over 40 should have a medical examination before taking up athletics.

The information given will be kept in the strictest confidence. Where there is concern, the club may request that you seek medical advice before starting to train.

- Do you suffer from any heart or lung defect?  YES  NO \*
- Do you suffer from diabetes?  YES  NO \*
- Do you suffer from epilepsy?  YES  NO \*
- Do you suffer from asthma?  YES  NO \*
- Do you suffer from any condition which affects the bones or muscles?  YES  NO \*
- Are you under any form of medication or have suffered any serious disease or injury which may affect your ability to train or compete?  YES  NO \*

If you have answered yes to any of these questions, please give details: .....  
.....  
.....  
.....

If you begin to suffer from any of the above disabilities or develop an infection which raises your body temperature, training may not be advisable and it is your duty to inform your coach and discuss the matter with him/her.

## CONDUCT

I agree to be bound by the club constitution and Code of Conduct as may be published from time to time.  YES  NO \*

## PHOTOGRAPHY

For purposes such as club magazines, newsletters and promotional material, it may be necessary to use photographs featuring club members. Wherever possible, the club will seek permission from members or their parents before using their photograph in any way, but this cannot be guaranteed. If you DO NOT wish the club to use any photographs in which you/your child feature, please indicate this by ticking here .

## ELIGIBILITY

I confirm that I am eligible to compete under UK Athletics rules.  YES  NO \*

## DISCLOSURE OF DATA

I understand and agree that the personal data I have given will be held on a computer by the club and that this data will be disclosed on a list of members to the UK Athletics and may be used for Team entry forms and League competitions.

YES  NO \*

\* Please indicate as appropriate

# PARENTAL CONSENT

If the member is under the age of 18, this form MUST be signed by a parent or responsible guardian.

Signature of Parent/Guardian
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Date
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